(d) The measures being taken to promote the small famiiy norm include:

Reorientation of information, education and communication efforts, involvement of voluntary and non-Governmental organisations, improving the quality and outreach of -services with special emphasis on the low performing states and districts, introduction of new contraceptives and improving the quality and availability of existing ones: strengthening maternal and child health and revitalising the training of medical and para-medical personnel.

Provision for low cost family planning methods

996. SHRI ASHWANI KUMAR: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that familv planning has become quite costly in the recent past and is likely to become even costlier in future;

(b) if so, what action Government are contemplating to provide low cost family planning methods to encourage the family planning programme; and

(c) whether Government propose to involve the non-allopathic doctors in the villages in the Family Palnning Programme?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI D. K. THARA DEVI SIDDHARTHA): (a) The cost of providing family Planning iservices for prevention of one birth is very low in comparison to the total cost involved in providing services and facilities for bringing up and supporting an individual person and this would be the position in ftuture also.

(b) Different contraceptive devices/ methods are offered under the Family Welfare Programme for adoption by the individual acceptors best suited to their choice. There are made available either free of charge or on subsidised cost under social marketing schemes. Continuous efforts are on to evolve more acceptable, effective and low cost methods of contraception. As maternal and Child health care is an integral part of the Family Welfare Programme and closely related to family planning, immunisation coverage and other important maternal and child health care interventions are provided to the people free or cost.

(c) Yes, Sir.

Incentive for small family norms

997. SHRI MURLIDHAR CHANDRAKANT BHANDARE: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether the National Develop ment Council at its 3-day meeting held on 23rd December, 1991, had consider ed realistic incentives and disincentives to encourage small family norms;

(b) if so, what decisions were taken therein in this regard; and

(c) what steps have since been taken to implement the same?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI D. K. THARA DEVI SIDDHARTHA): (a) to (c) The National Development Council in its meeting held on 23-24th December, 1991 considered, .*inter-alia,* the following two papers:—

(i) Population Control: Perspective and Planning. (Prepared by the Planning Commission)

(ii) Population Control: Challenges and Strategies.

(Prepared by the Department of Family Welfare)

A new formula for the distributoin of Central assistance to non-special Category Central assistance to non-special Category formula, 7.5 per cent of Central assistance would be linked to performance under various sectors including population control.